

Marijuana and Work Comp

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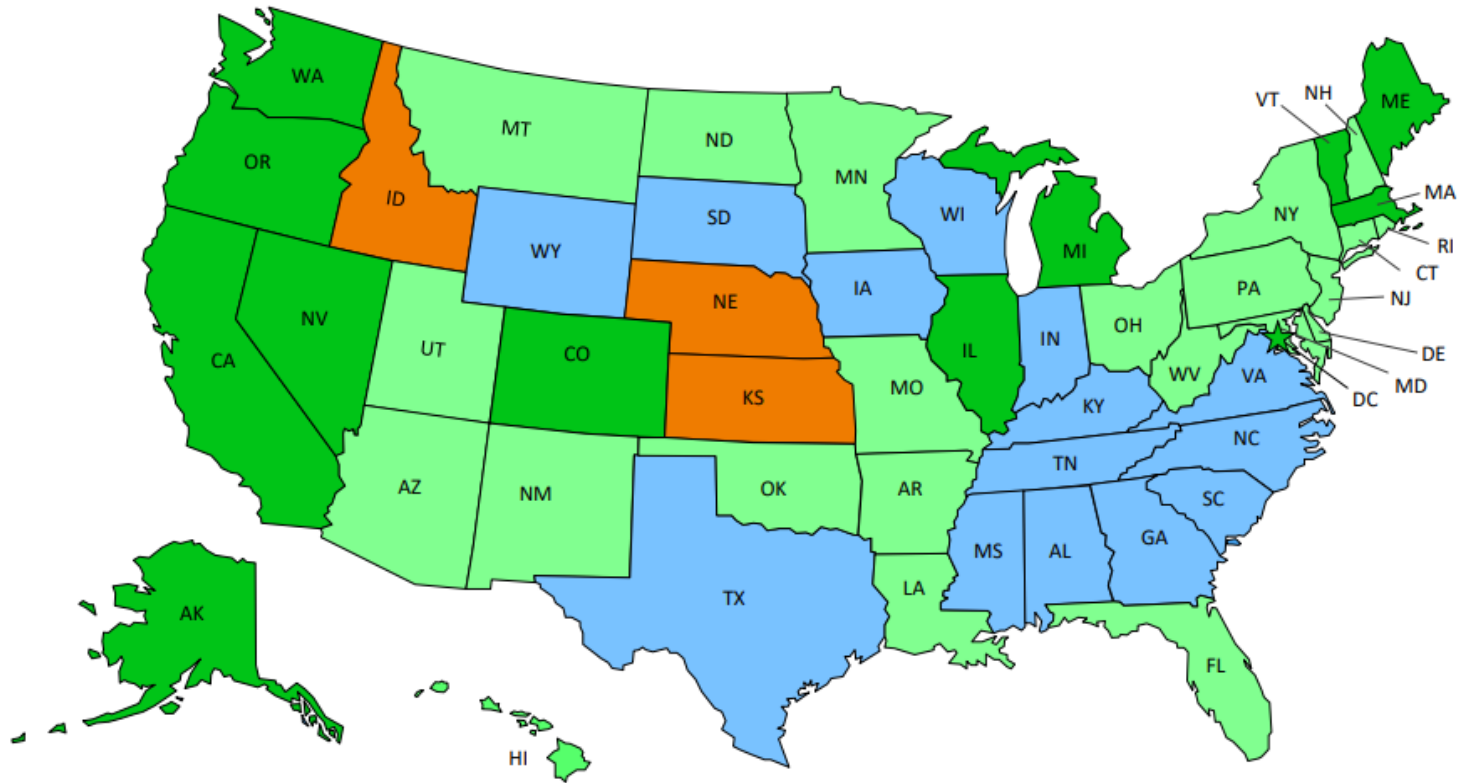


Montana Department of
LABOR & INDUSTRY

Marijuana Legalization Among the States (NCCI)

2019 (NCCI)

Marijuana Legalization Status



Recreational or medical marijuana, legal in 33 states:

AK, AZ, AR, CA, CO, CT, DE, FL, HI, IL, LA, ME, MD, MA, MI, MN, MO, MT, NV, NH, NJ, NM, NY, ND, OH, OK, OR, PA, RI, UT, VT, WA, and WV

CBD, solely, legal in 15 states:

AL, IN, IA, KS (2018), KY, MS, NE (2018), NC, SC, SD (2020), TN, TX, VA, WI, and WY

Low THC oil, solely, legal in 1 state:

GA

Illegal in 1 state:

ID

Marijuana and Work Comp Reimbursement among the States

Montana Medical Marijuana Act

50-46-320 (4)(a)(b) and (5)(a)(b), (MCA)

(4) Nothing in this part may be construed to require:

(a) a government medical assistance program, a group benefit plan that is covered by the provisions of Title 2, chapter 18, an insurer covered by the provisions of Title 33, or an insurer as defined in 39-71-116 to reimburse an individual for costs associated with the use of marijuana by a registered cardholder;

(b) an employer to accommodate the use of marijuana by a registered cardholder

(5) Nothing in this part may be construed to:

(a) prohibit an employer from including in any contract a provision prohibiting the use of marijuana for a debilitating medical condition; or

(b) permit a cause of action against an employer for wrongful discharge pursuant to 39-2-904 or discrimination pursuant to 49-1-102.

Montana Work Comp Act

39-71-407 (6)(c), (MCA)

(c) Nothing in this chapter may be construed to require an insurer to reimburse any person for costs associated with the use of marijuana for a debilitating medical condition, as defined in 50-46-302.

ARM 24.29.1526

(3) Medical services which are not payable include, but are not limited to, the following: (a) disc nucleoplasty; (b) extreme lateral interbody fusion (XLIA); (c) freeze-framer; (d) frequency specific micro current; (e) HEALOS/leopard cage; (f) inter X therapy; (g) kinesis myofascial integration; (h) lidoderm patch; (i) percutaneous disc nucleoplasty; and (j) medical marijuana.

Marijuana is specifically excluded or not required to be reimbursed by work comp insurers in Montana, as well as

- Rhode Island (HB 5151, 2019)
- Massachusetts (Wright v. Pioneer Valley, 2019)
- Maine (Bourgoin v. Twin Rivers Paper Co, 2018)
- Arizona
- Colorado
- Florida
- Louisiana
- Michigan
- New York
- North Dakota
- Pennsylvania
- Washington
- Oklahoma (just recently)

New Mexico, was the first, to have an appellate court issue a decision that required an insurer to provide reimbursement for an injured worker using medical marijuana to treat their injury (Vialpando v. Ben's Automotive Services, 2014)

- New Jersey
- Connecticut
- Maine
- Minnesota, an insurer voluntarily paid

In 2020, several states considered legislation to authorize the reimbursement of medical marijuana

A handful of others do not prohibit nor require reimbursement

Marijuana remains illegal under Federal law

Medical Marijuana Regulations, among State Work Comp Systems, Inventory as of January 1, 2020 (WCRI)

Table 16 Medical Marijuana Regulations (both general and workers' compensation-specific) as of January 1, 2020

This table shows the ways different states are approaching the issue of medical marijuana, and increasingly also of recreational marijuana. As of this writing (early 2020), marijuana remains generally illegal under federal law, which may be enforced over the objections of state governments. However, since the last edition of this report, Section 10113 of Public Law 115-334, the Agriculture Improvement Act of 2018 (2018 Farm Bill) removed hemp, and derived products such as cannabidiol with up to 0.3% THC from Schedule I of the Controlled Substances Act. This is an interim rule, effective October 31, 2019, through November 1, 2021, with the expectation that a final rule will be issued before then. Recall that this table shows a snapshot, as of January 1, 2020, of a fast-moving target, with a great deal of current legislation and litigation.

Jurisdiction	Statute Reference	Is Medical Marijuana Legal in Jurisdiction? ^a		Conditions for Legal Rx ^a		Prescriber Training Required (e.g., CME units)	Medical Marijuana in the Workplace			Is Recreational Marijuana Legal in Jurisdiction?
		By Law	By Case Law (i.e., not statute)	Only CBD (cannabidiol)	Other Limit		Is Workers' Compensation Specifically Excluded from Statute?	Does Workers' Compensation Fee Schedule Include Medical Marijuana?	Restrictions on Employment Drug Screens for Marijuana	
Alabama	AL Code § 13A-12-214.3 ^b	No (CBD oil legal)		Yes		None	No	No	None	No
Alaska	AK Stat § 17.37	Yes	Yes			None	No	No	AS 23.10.600 (1)	Yes
Arizona	A.R.S. § 36-28 ^b	Yes ^b					Yes	No	"An employer may use the verification system only to verify a registry identification card that is provided to the employer by a current employee or by an applicant who has received a conditional offer of employment." § 36-2807 ^b	No ^a
Arkansas	AR Code § 20-56 ^b	Yes ^b			AR Code § 20-56-301 prohibits dispensing from vending machines ^b		N/A	No	N/A	No ^b
California	CA Business & Prof. Code § 26000 et seq.	Yes	Yes		Must be 18 years of age	None	No	No		Yes (2)
Colorado	CO Rev Stat § 44-11 ^b	Yes ^b			Prescribers can write a recommendation for no more than two ounces of a usable form of marijuana ^a	None ^b	Yes	No	None	Yes § 44-12 ^b
Connecticut	CT Gen Stat § 21a-408 (Chapter 420f) ^b	Yes ^b		Regulated by Department of Consumer Protection ^a	Regulated by Department of Consumer Protection ^a		No	No		No ^a
Delaware ^b	16 DE Code § 49A	Yes								No
District of Columbia ^b	DC Code § 7-1671	Yes								Yes
Florida	FL Stat § 381.986 to 381.988 ^b	Yes ^b			(3)	Initial and subsequent annual training course and exam ^b	Yes	No	N/A	No ^a
Georgia	Low THC oil is legal to possess under certain circumstances, GA code section 16-12-191	No		16-12-231	Prescribers and dispensers must query the PDMP before certifying or dispensing low THC	None	See O.C.G.A. § 34-9-415	No	None	No
Hawaii	HI Rev Stat § 329D ^b	Yes ^b		(4)	(4)		No	No		No § 712-1249.5 ^b
Idaho	ID Code § 37-2732	No	No	Idaho Code § 37-2705		None	N/A	No	None	No
Illinois ^b	(410 ILCS 130/1)	Yes			(410 ILCS 705) Cannabis Regulation and Tax Act		No			Yes
Indiana	IN Code § 16-42-28.6-7 ^b	No ^a	No ^a	Yes ^b		None ^b	Not addressed by comp statute	Not addressed by comp statute	None	No IC 35-48-4-11 ^b

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Iowa	https://www.legis.iowa.gov/doc/code/124e.pdf	No, medical cannabidiol only (as defined in Iowa Code section 124E.2)	No	Yes, per physician's written certification (not Rx)	Limited to patients identified by primary care physician as having a debilitating medical condition qualifying the patient to use medical cannabidiol	No		No FS		No
Kansas	KS Stat § 21-5706 K.S.A. 65-4105(d) and (h) ^b	No ^a		Yes ^b		None ^b	No	No	N/A	No ^a
Kentucky	KY Rev Stat § 520.010	No ^a	No ^a	Yes ^b		None ^b		No		No ^b
Louisiana	R.S. 40:1046	Yes		(5) (6)	No raw, crude, or smokable products	No	Yes (7)	No (7)	None (7)	No
Maine ^b	28-B ME Rev Stat §101 to §1102 PL 2017, c. 409, Pt. A, §6	Yes			Regulations on growing and manufacturing 22 ME Rev Stat § 2423-F					Yes
Maryland	MD Health Occ Code § 14-404 ^b	Yes ^b		Yes ^a			SB 854 allows MM as approved treatment, but if workplace injury solely due to misuse of MM then <u>not a covered injury</u>			No MD Crim Law Code § 5-601 ^b
Massachusetts	MA Gen L ch 94I § 1 ^b	Yes ^b					No	No		Yes MA Gen L ch 94G § 7 ^b
Michigan	(8)	Medical marijuana is legal for individuals registered with the state, who hold an approved card from the state	No	No prescription necessary	2.5 ounces of usable marijuana and usable marijuana equivalents and 12 plants if no caregiver	None	Yes (9)	No	No	Yes (8)
Minnesota	MN Stat § 152.22-152.37 Office of Medical Cannabis, Minnesota Department of Health	Yes (10) ^a			Liquid, oil, vapor from liquid or oil, pill (11) ^a		No	No		No MN Stat § 152.027
Mississippi	MS Code § 41-29-136 § 33-13-520 ^b	No (CBD oil legal)		Yes, Hemp law - under 0.03% THC; medical - 0.5% for epilepsy		None				No
Missouri	No statutes were enacted but a voter referendum passed (12)	No	No	No	No Rx allowed	None	No	No FS		No
Montana	MCA statute Title 50 Chapter 46	Yes		See 50-32-221 through 232, MCA (13)	See 50-32-221 through 232, MCA (13)	No	(14)	No, not allowed for compensation under ARM 24.29.1526(3)(j)	See 39-2-207, MCA	No
Nebraska		No	No	Yes		None	N/A	No	N/A	No
Nevada	NV Rev Stat § 453D (through June 30, 2020) NV Rev Stat § 678B (effective July 1, 2020) ^b	Yes ^b				No ^b	No	No, not part of adopted drug formulary	May not base employment decision on positive test for marijuana (excludes safety-sensitive jobs)	Yes ^a



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New Hampshire	NH Rev Stat § 126-X ^b	Yes ^b		No NH RSA 126-X ^a	No NH RSA 126-X ^a	No ^b	No	N/A - No FS	None per workers' compensation law	No NH Rev Stat § 318-B:2 NH Rev Stat § 359-O ^b
New Jersey	NJ Rev Stat § 24:61 ^b	Yes ^b			(15)	No ^b	No	No (16)		No NJ Rev Stat § 2a:62-2 NJ Rev Stat § 2c:35-10 ^b
New Mexico	7.34.1 NMAC found at: http://164.64.110.134/nmac/707C034	Yes		No			No	Yes		No
New York	NY Pub Health L § 3397 ^b	Yes ^b				No ^b	Yes	No	N/A	No NY Penal L § 221 ^b
North Carolina ^b	NC Gen Stat § 106-568	No		Yes		None				No NC Gen Stat § 90-89
North Dakota (17)	NDCC § 19-24.1	Yes					Yes	No	No restrictions	No
Ohio	ORC/OAC 3796	Yes				State requires two hours of professional development credits before issuing written recommendations	No	No	None	No
Oklahoma ^b	TITLE 310. Oklahoma State Department of Health CHAPTER 681. Medical Marijuana Control Program	Yes		Yes		No				No
Oregon	http://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/CHRONIC/DISEASE/MEDICALMARIJUANA/PROGRAM/Document%20s%204758B%20Cannabis%20Regulation.pdf	Yes	Yes	No	Maximum doses/forms listed in http://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/CHRONIC/DISEASE/MEDICALMARIJUANA/PROGRAM/Documents/rules/33-007-0220-Table-2-eff-05-31-17.pdf	State requires two hours of CME credits, ideally before issuing written recommendations ^b	No	No	N/A	Yes
Pennsylvania	Penn Stat Tit. 35 §780-101, et seq. ^b	Yes ^b				State requires completion of four-hour training class plus two hours of CME credits ^b	The act does not require insurers to pay for MM	No	None	No ^b
Rhode Island	RI Gen L § 21-28.6 ^b	Yes ^b		No limits ^a	No limits ^a		No (18)	No		No ^a
South Carolina	SC Code § 44-53 ^b	No ^a	No ^a	Yes ^b		None ^b				No ^a
South Dakota	SDCL 34-20B-25 (53)	No	No	All illegal except for CBD which must be approved by the FDA and must be on a prescription in SDCL 34-20B-25 (53)		None				No
Tennessee	TN Code § 39-17 and 21 CFR 1308 ^b	No ^a		Yes ^b		None ^b	N/A (19)	No (19)	Subject to DFWP and DOT Regulations (19)	No ^a

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Texas	https://statutes.capitol.texas.gov/Docs/OC/htm/OC.169.htm#169.001 https://statutes.capitol.texas.gov/Docs/HS/htm/HS.487.htm#487.001	(20)		Yes ^b	(21)		No	No		No
Utah	26-61a-104	Yes		No (22)		Yes				No
Vermont ^b	https://medicalmarijuana.vermont.gov/	Yes								Yes
Virginia	§§18.2-250.1, 54.1-3408.3, 54.1-3442.5, 54.1-3442.7	CBD and THC-A oil are legal (23)		Yes	Prescriber must check PDMP; THC-A oil allowed as well (23)	No	The statute does not define requirements for medical marijuana (24)			No
Washington	Chapter 69.51A RCW http://apps.leg.wa.gov/RCW/default.aspx?cite=69.51A	Yes	Yes – see RCW 69.51A	No limit (25)	Yes (26)	A healthcare practitioner issuing authorizations or valid documentation for the medical use of marijuana (cannabis) on or after the effective date of these guidelines, should complete a minimum of three hours of continuing education related to medical marijuana per Medical Marijuana Authorization Practice Guidelines published by the regulating Boards and Commissions (27)	Yes	No	Employers can implement drug-free workplace	Yes
West Virginia ^b	W. Va. Code, § 19-12E									No
Wisconsin	WI Stat § 961.11(4g) et. seq. WI Stat § 94.55 et. seq. ^b	No ^a	No ^a	Yes ^b		None ^b	N/A	N/A		No ^a
Wyoming	WY Stat § 35-7-1063 and § 35-7-1801 to 1803 ^b	No ^a		Yes ^b		None ^b	No	No		No ^a

Notes: ^a Because marijuana remains illegal under federal law, it is technically not legal even where the jurisdiction has legalized it.

^a 2018 data. No 2020 response was provided.

^b These data were supplied by WCRI based on a review of the regulations and secondary sources, and then provided to the jurisdictional agency for review.

¹ Alaska – Optional for employers and for employment drug-testing program purposes.

² California – Recreational marijuana became legal on January 1, 2018; must be age 21 or older.

³ Florida – Medical marijuana may be used for patient care if it is prescribed by a qualified Florida physician licensed under Chapter 459 or Chapter 458, Florida Statutes, in a manner that is consistent with the standard of care. ^a

⁴ Hawaii – There is no prescription written in the State of Hawaii for medical marijuana. HRS Chapter 329 only requires a registration from the patient with the doctor's authorization. ^a

⁵ Louisiana – The law authorizes physicians to issue recommendations to patients suffering from any of the qualifying medical conditions itemized at La RS 40:1046(A)(2).

⁶ Louisiana – Since you mentioned CBD – Act 164 of the 2019 Legislature established a regulatory structure for the retail sale of hemp-derived cannabidiol products.

⁷ Louisiana – La. R.S. 23:1081.

⁸ Michigan – Medical marijuana is legal for an individual registered with the state, who holds an approved card from the state pursuant to Initiated Law 1 of 2008, MCL 333.26241 et seq. See [http://www.legislature.mi.gov/!\(S!emtkzydirdpoi4xmF5z050d\)/documents/mcl/pdf/mcl-Initiated-Law-1-of-2018.pdf](http://www.legislature.mi.gov/!(S!emtkzydirdpoi4xmF5z050d)/documents/mcl/pdf/mcl-Initiated-Law-1-of-2018.pdf).

Recreational marijuana is also legal in Michigan for adults 21 years of age and older pursuant to Initiated Law 1 of 2018, MCL 333.27951 et seq. See [http://www.legislature.mi.gov/!\(S!emtkzydirdpoi4xmF5z050d\)/documents/mcl/pdf/mcl-Initiated-Law-1-of-2018.pdf](http://www.legislature.mi.gov/!(S!emtkzydirdpoi4xmF5z050d)/documents/mcl/pdf/mcl-Initiated-Law-1-of-2018.pdf).

⁹ Michigan – Section 315a of the MI Workers' Disability Compensation Act states that an employer is not required to reimburse for medical marijuana treatment.



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	10	Minnesota - Administered by MN Department of Health: Office of Medical Cannabis. ^a								
	11	Minnesota - Actual plant material that can be smoked is not allowed. ^a								
	12	Missouri - Additional information is available online by searching the Missouri Section of Medical Marijuana Regulation. Regulations are in 19 CSR 30-95. Email is medicalmarijuanainfo@health.mo.gov .								
	13	Montana - FDA-approved cannabidiol prescription products follow DEA scheduling of controlled substances. See 50-32-222(9), MCA, and 50-32-232(4), MCA.								
	14	Montana - See MCA 36-71-407(6)(c)—WC insurer not required to reimburse medical marijuana costs.								
	15	New Jersey - Patient must register in state every two years. Specific dosage must be determined by the physician and specified in writing. ^a								
	16	New Jersey - There have been unpublished court decisions that medical marijuana should be covered.								
	17	North Dakota - The Department of Health is the authority on these questions.								
	18	Rhode Island - Nothing in the statute obliges workers' compensation payors to cover medical marijuana. A person may not be penalized or refused a job based solely on use of medical marijuana.								
	19	Tennessee - Tennessee does not recognize medical or recreational marijuana as legal.								
	20	Texas - Regulated by the Texas Department of Public Safety.								
	21	Texas - The Texas Compassionate Use Act states that low-THC cannabis is available to a permanent resident of the state if the patient has certain diagnoses and meets other conditions. There are additional restrictions for prescribers and licensed dispensaries.								
	22	Utah - Utah Medical Cannabis Act 2018 General Session HB3001.								
	23	Virginia - The state has not legalized possession of cannabidiol or THC oil, but being registered with the state is an affirmative defense against charges of criminal possession. The state regulates growing conditions, monitors quality and labeling of end product, and sets requirements for recordkeeping. The state allows practitioners to decide for which chronic conditions and patients they will issue patient registration cards. Prescribers must register with the state PDMP and pay a registration fee.								
	24	Virginia - § 65.2-605 - Medical service means any medical, surgical, or hospital services required to be provided to an injured person pursuant to this title.								
	25	Washington - Prescribers authorize medical marijuana but do not prescribe. See RCW 69.51A.								
	26	Washington - See RCW 69.51A.010, definition of terminal or debilitating medical condition.								
	27	Washington - Medical Marijuana Authorization Practice Guidelines: https://wmc.wa.gov/sites/default/files/public/documents/Medical%20Marijuana%20Cannabis%20Authorization.pdf .								



Marijuana part of the Prescription Drug Monitoring Program (PDMP) among States (WCRI)

Table 13 Prescription Drug Monitoring Programs – Rules for Data Collection and Maintenance, All Payors as of January 1, 2020

As of January 2020, nearly all states and the District of Columbia have prescription drug monitoring programs (PDMPs). A PDMP is a state-administered database of all prescriptions for specified drug types that were filled in the state, for each patient. The PDMP includes prescriptions from all payors. Prescribers and pharmacists can check the PDMP to determine whether a patient already has similar prescriptions and is at risk for harm. Each state has its own list of covered drugs, usually scheduled drugs, but may include other drugs like benzodiazepines or gabapentin. The programs differ in the specific drugs monitored, how prescribers and pharmacists are expected to use it, and whether they are responsible for checking or for updating the PDMP. Table 13 offers salient data on how these programs collect and update their data. Table 14 shows how and under which circumstances these data may be used, and how patients' medical privacy is respected.

Jurisdiction	Does Jurisdiction Have a PDMP?	Agency that Maintains PDMP	State Link to PDMP	Drugs Covered by PDMP						Consulting Required before Writing or Filling Prescriptions		Who is Responsible for Updating PDMP?	
				Schedule II	Schedule III	Schedule IV	Schedule V	Medical Marijuana	Other	Prescriber	Dispenser	Prescribers	Dispensers
Alabama	Yes	Department of Public Health, Pharmacy Division AL Code §20-2-210	https://alabamapublichealth.gov/PDMP	Yes	Yes	Yes	Yes	No		No	No	No	Yes
Alaska	Yes	Board of Pharmacy	https://alaska.pmpaware.net	Yes	Yes	Yes		No		Yes (1)	No	No	Yes
Arizona	Yes	Board of Pharmacy AZ Rev Stat §36-2601 (2019)	https://pharmacypmp.az.gov	Yes	Yes	Yes	Yes			Yes	Yes (Schedule II)	No	Yes (536-2608)
Arkansas ^a	Yes	Department of Health	https://arkansas.pmpaware.net/ ^a	Yes ^b	Yes ^b	Yes ^b	Yes ^b			Yes	No		
California	Yes	Law enforcement agency	Health and Safety Code, Business and Professions Code https://oag.ca.gov/cures	Yes	Yes	Yes	No (yes as of January 1, 2021)	No		Yes (2)	No, and not liable	No (3)	Yes
Colorado ^a	Yes	Colorado State Board of Pharmacy	12-42.5-401, C.R.S. https://www.colorado.gov/pacific/dora-pdmp	Yes	Yes	Yes	Yes			Yes, for second fill ^b	No		Yes
Connecticut ^a	Yes	Consumer protection agency	Connecticut General Statutes & Regulations	Yes	Yes	Yes	Yes			Yes	Yes	Yes	Yes
Delaware ^b	Yes	Office of Controlled Substances (OCS) in the Delaware Division of Professional Regulation	https://dpr.delaware.gov/boards/pmp/	Yes	Yes	Yes	Yes			Yes	Yes		
District of Columbia ^b	Yes	DC Department of Health	dchealth.dc.gov/service/prescription-drug-monitoring-program	Yes	Yes	Yes	Yes		Butalbital, cyclobenzaprine	No	No	No	Yes
Florida ^a	Yes (4)	Florida Department of Health	http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&URL=0800-0899/0893/Sections/0893.055.html	Yes	Yes	Yes	Yes			Yes ^b	Yes ^b		
Georgia	Yes	Department of Public Health	www.dph.georgia.gov/pdmp	Yes	Yes	Yes	Yes	No	No	Yes (5)	No	Yes, if dispensing controlled substances	Yes
Hawaii ^a	Yes	Narcotics Enforcement Division ^b	HRS §329-101	Yes	Yes	Yes	Yes			No	No		
Idaho	Yes	Idaho State Board of Pharmacy	https://legislature.idaho.gov/statutesrules/idstat/TITLE37/T37CH27/SECT37-2726/ https://idaho.pmpaware.net/login	Yes	Yes	Yes	Yes	No	Opioid antagonists	No	No		Yes
Illinois ^b	Yes	Illinois Department of Health	https://www.ilpmp.org/	Yes	Yes	Yes	Yes			Yes	No	No	
Indiana ^b	Yes	Indiana Professional Licensing Agency	https://indiana.pmpaware.net	Yes	Yes	Yes	Yes				No	No	Yes



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Jurisdiction	Does Jurisdiction Have a PDMP?	Agency that Maintains PDMP	State Link to PDMP	Drugs Covered by PDMP						Consulting Required before Writing or Filling Prescriptions		Who is Responsible for Updating PDMP?	
				Schedule II	Schedule III	Schedule IV	Schedule V	Medical Marijuana	Other	Prescriber	Dispenser	Prescribers	Dispensers
Iowa	Yes	Iowa Board of Pharmacy	https://iowa.pmpaware.net/	Yes	Yes	Yes	No	No	Naloxone	Yes, as of 7/1/2018 (6)	No	Yes, as of 7/1/2018 (6)	Yes
Kansas ^a	Yes	Kansas State Board of Pharmacy	https://kansas.pmpaware.net ^b	Yes	Yes	Yes	Yes				No	Yes	Yes
Kentucky ^a	Yes	Department of Health	KRS 218A.202	Yes	Yes	Yes	Yes			Yes	Yes		Yes
Louisiana	Yes (7)	Board of Pharmacy	https://louisiana.pmpaware.net	Yes	Yes	Yes	Yes	Yes (each purchase treated as an Rx)	Drugs of concern, defined by rule by pharmacy board	Yes	No	No	Yes (8)
Maine ^b	Yes	Maine Department of Health and Human Services	https://maine.pmpaware.net	Yes	Yes	Yes	Yes		Benzodiazepines	Yes	No	No	Yes
Maryland ^a	Yes	Department of Health	https://bha.health.maryland.gov/pdmp/Documents/Version%2011%20PDMP%20Fact%20Sheet%20FINAL%20(1).pdf	Yes	Yes	Yes	Yes			No	Yes		Yes
Massachusetts ^a	Yes	Department of Health	https://www.mass.gov/prescription-monitoring-program-pmp	Yes	Yes	Yes	Yes		Gabapentin	Yes	No		Yes
Michigan	Yes	Professional licensing agency	Licensing and Regulatory Affairs http://www.legislature.mi.gov/IS/gsrhvw4f3yqw52qvibd21q)/mileg.aspx?page=getobject&objectname=mcl-333-7333a&query=on&highlight=7333a	Yes	Yes	Yes	Yes	No		Yes (9)	Yes (9)	Yes	Yes
Minnesota	Yes	Minnesota Board of Pharmacy	http://pmp.pharmacy.state.mn.us/	Yes	Yes	Yes	Yes		Gabapentin, butalbital	Yes	No	No	Yes
Mississippi	Yes	MS Board of Pharmacy	https://mississippi.pmpaware.net/	Yes	Yes	Yes	Yes	No	Yes (10)	Yes	Yes (limited) (11)	Yes, if dispensing	Yes
Missouri	No (12)							No		No	No	No	No
Montana	Yes	Board of Pharmacy	MCA statute 37-7-1501 through 1514, ARM rule 24.174.1701 through 1715; www.mprdr.mt.gov	Yes	Yes	Yes	Yes	No		Yes (13)	No	No	Yes (14)
Nebraska	Yes	Health & Human Services	http://dhhs.ne.gov/publichealth/PDMP/Pages/Home.aspx	Yes	Yes	Yes	Yes			Not covered by statute	Not covered by statute	Yes	Yes
Nevada ^a	Yes	Board of Pharmacy	NRS 453.1545	Yes	Yes	Yes	Yes			Yes	No (15)		Yes
New Hampshire ^a	Yes	New Hampshire Board of Pharmacy	PH1500	Yes	Yes	Yes	Yes			Yes	No		Yes
New Jersey ^a	Yes	New Jersey Division of Consumer Affairs	http://www.njconsumeraffairs.gov/pmp ^b	Yes	Yes	Yes	Yes			Yes			Yes
New Mexico	Yes	New Mexico Board of Pharmacy	http://164.64.110.134/parts/title16/16.019.0029.html	Yes	Yes	Yes	Yes	No		Yes	Yes	No	Yes
New York ^b	Yes	Department of Health	http://www.health.state.ny.us/professionals/narco/tic/	Yes	Yes	Yes	Yes		HCG	Yes	No	Yes	Yes



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North Carolina ^b	Yes	Department of Health and Human Services	http://www.ncdhhs.gov/mhddsas/	Yes	Yes	Yes	Yes			Yes	Yes	Yes	Yes
North Dakota	Yes	North Dakota Board of Pharmacy	19-03.5 https://northdakotapmpaware.net	Yes	Yes	Yes	Yes	No	Gabapentin	Yes	Yes	No	Yes
Ohio	Yes	Pharmacy Board	www.pharmacy.ohio.gov/OARRS	Yes	Yes	Yes	Yes	Yes (each purchase treated as an Rx)	Gabapentin and naltrexone	Yes	Yes	No	Yes
Oklahoma ^a	Yes	Law enforcement agency	https://www.ok.gov/obnnd/	Yes	Yes	Yes	Yes			Yes	No	Yes	Yes
Oregon	Yes	Oregon Health Authority	http://www.orpdmp.com/	Yes	Yes	Yes	Yes	No	Naloxone, gabapentin [16]	Yes [17]	No	No	Yes
Pennsylvania	Yes	Department of Health	http://www.legis.state.pa.us/cfdocs/legis/li/ucons/Check.cfm?yr=2014&sessind=0&act=191	Yes	Yes	Yes	Yes			Yes	Yes	Yes	Yes
Rhode Island ^a	Yes	Department of Health	§ 21-28-3.32 http://health.ri.gov/programs/detail.php?pgm_id=156/	Yes	Yes	Yes	Yes			Yes	No		Yes
South Carolina ^a	Yes	Department of Health	https://www.scdhec.gov/Health/FHPF/DrugControlRegisterVerify/PrescriptionMonitoring/	Yes	Yes	Yes	No			Yes	Yes	Yes	Yes
South Dakota	Yes	South Dakota Board of Pharmacy	SDCL 34-20E and ARSD 20-51:32	Yes [18]	Yes [18]	Yes [18]	Yes [18]	No		Yes [19]	No, and not liable	No	Yes
Tennessee ^a	Yes	Department of Health	TCA 53-10	Yes	Yes	Yes	Yes			Yes [20]	Yes [20]		Yes
Texas	Yes	TSBP	http://www.pharmacy.texas.gov/PMP/	Yes	Yes	Yes	Yes	No		Yes [21]	Yes [21]	No	Yes
Utah	Yes	Division of Occupational and Professional Licensing	https://csd.utah.gov	Yes	Yes	Yes	Yes	No	Gabapentin	Yes for acute Rx	No	No	Yes
Vermont ^b	Yes	Department of Health	https://vermont.pmpaware.net/	Yes	Yes	Yes				Yes	Yes	Yes	Yes
Virginia	Yes	Department of Health Professions	https://www.dhp.virginia.gov/PractitionerResources/PrescriptionMonitoringProgram/	Yes	Yes	Yes	Yes, if requiring a prescription	Cannabidiol or THC oil 18VAC76-20-20	Gabapentin (Schedule V); naloxone	Yes, under certain circumstances 18VAC85-21	No	No	Yes
Washington	Yes	Department of Health	Chapter 70.225 RCW https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionalsandFacilities/PrescriptionMonitoringProgramPMP	Yes	Yes	Yes	Yes	No	N/A	Yes, but varies by regulatory authority	No	No	Yes
West Virginia	Yes	Board of Pharmacy	https://www.csappwv.com	Yes	Yes	Yes	Yes	No	Opioid antagonists	Yes	No	Yes, if they dispense	Yes
Wisconsin ^a	Yes	Wisconsin Department of Safety and Professional Services	https://dps.wi.gov/pdmp	Yes	Yes	Yes	Yes			Yes	No		Yes



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Wyoming ^a	Yes	Board of Pharmacy	http://pharmacyboard.state.wy.us/pdmp.aspx ^b	Yes	Yes					Yes	Yes		
Notes:													
a 2018 data. No 2020 response was provided.													
b These data were supplied by WCRI based on a review of the regulations and secondary sources, and then provided to the jurisdictional agency for review.													
1 Alaska - Must check PDMP before prescriptions, except for inpatient, 48 hours after a surgery or medical procedure, in ambulance or ED, hospice, in hospital or nursing home with its own pharmacy. Not required to check for a prescription for up to 3 days worth of medication.													
2 California - Effective October 2, 2018, health care practitioners authorized to prescribe are mandated to consult PDMP the first time a patient is prescribed, ordered, administered, or furnished a Schedule II, III, or IV controlled substance and at least once every four months if the controlled substance remains a part of the patient's treatment plan.													
3 California - Generally, prescribers are not required to contribute data to the PDMP (CURES). However, pursuant to CA Health and Safety Code Section 11190(c)(2)(A), practitioners that dispense controlled substances directly to their patients must report the dispensing information to the Department of Justice (DOJ).													
4 Florida - HB 21 makes substantial changes to Florida law with respect to prescription drug monitoring. Many of these changes became effective on July 1, 2018. ^a													
5 Georgia - Refer to O.C.G.A. 16-13-63.													
6 Iowa - Governor Kim Reynolds signed HF2377 into law, which became effective July 1, 2018. Part of this law (Iowa Code section 124.551A) requires prescribers to register for and utilize the PMP pursuant to rules adopted by the prescriber's primary licensing board. Another part of the law (Iowa Code section 124.552) requires dispensing prescribers to report to the PMP.													
7 Louisiana - La RS 40:1001 - 1014.													
8 Louisiana - Dispenser required to report all dispensing transactions for all controlled substances, medical marijuana, and drugs of concern.													
9 Michigan - Prescribers and dispensers must run a report for more than a 3-day supply of a controlled substance, with exceptions (MCL 333.7303a). A pharmacist, dispensing prescriber, veterinarian, or a pharmacy licensed by the state, who dispenses a controlled substance must report to the MAPS system.													
10 Mississippi - All products containing pseudoephedrine and butalbital.													
11 Mississippi - Prior to dispensing a prescription for a Schedule II opiate, a pharmacist shall review the prescription monitoring program based on any of the following circumstances: a. The patient is a new customer to that pharmacy; or b. The patient has not had an opioid prescription filled at that pharmacy within six (6) months; 5. The prescription monitoring program shall be reviewed at least once every six (6) months for any patient receiving controlled substances.													
12 Missouri - St. Louis has a voluntary PDMP that 75 counties have joined and passed a local ordinance. This is not statewide but covers over 80% of the population.													
13 Montana - Effective July 1, 2021, prescriber mandatory use of the Montana Prescription Drug Registry prior to prescribing an opioid or a benzodiazepine, with exceptions as provided in 37-7-1515, MCA.													
14 Montana - Pharmacies are required to submit prescription data by close of the next business day after dispensing; ARM 24.174.1704.													
15 Nevada - The rules do not mention requirements. ^a													
16 Oregon - https://olis.leg.state.or.us/liz/2017R1/Downloads/MeasureDocument/HB3440 .													
17 Oregon - They are required to be registered with the PDMP.													
18 South Dakota - We collect Schedules II-IV; however, CV's are CIV's in South Dakota due to an odd law change years ago.													
19 South Dakota - Only for documentation purposes with chronic non-cancer pain.													
20 Tennessee - Must access the PDMP for opioids and benzodiazepines. ^a													
21 Texas - Effective March 1, 2020, prescribers and dispensers will be required to query the prescription monitoring program prior to issuing a prescription for opioids, benzodiazepines, barbiturates, or carisoprodol, unless the patient has been diagnosed with cancer or sickle cell disease or is in hospice care.													

